## **ABSTRACT**

## DESIGNING A STUDY TO EXAMINE FAMILY HISTORY, RISK PERCEPTION, CANCER WORRY, AND USE OF OVARIAN CANCER SCREENING

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Although the 1995 NIH Consensus Development Panel recommended screening modalities of CA125 and transvaginal ultrasound only for women at high risk for ovarian cancer, studies show that women who report high levels of perceived risk and screening are not always those with at highest risk. Research is needed to understand the discrepancy between perceived risk and 'objective' risk, as typically characterized by family history of cancer, and on how a woman's perceived risk is shaped by her knowledge and beliefs about cancer and experiences with relatives or friends who have had cancer, as well as by her family history. We describe methodological issues encountered in designing a study to examine 1) factors associated with a woman's perception of being at high risk for ovarian cancer, 2) characteristics that influence a woman's likelihood of being screened, and 3) whether having a positive family history and perceiving oneself to be a high risk for cancer lead to increased cancer worry.